<u>APPLICATION DATA SHEET</u>

App	lication l	Informati	ion

Application Number::

Filing Date::

December 15, 2004

Application Type::

Regular

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form

(CFR)?::

Number of Copies of CFR::

Title::

Craniofacial Implant

Attorney Docket Number::

36881-188775

Request for Early Publication?::

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

NO

7

Latin Name::

Variety Denomination Name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.::

Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship::

U.S.

Country::

U.S.

Status::

Full Capacity

Given Name::

Greg

Middle Name::

Family Name::

SWORDS

Name Suffix::

City of Residence::

Atlanta

State or Province of Residence::

Georgia

Country of Residence::

Street of Mailing Address::

Ralph McGill Boulevard, 3333

City of Mailing Address::

Atlanta

State or Province of Mailing

Address::

Georgia

Country of Mailing Address::

Postal or Zip Code of Mailing

30306

Address::

Correspondence Information

Correspondence Customer

Number::

26694

Phone Number::

202-962-4800

Fax Number::

202-962-8300

E-Mail Address::

acaitken@venable.com

Representative Information

Representative Customer

26694

Number::

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is a	National Stage of	PCT/US2004/011903	April 16, 2004
This application	claims priority from	60/463,036	April 16, 2003
This application	claims priority from	60/496,684	August 21, 2003

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
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Assignee Information

Assignee Name::

POREX SURGICAL, INC.

Street of Mailing Address::

15 Dart Road,

City of Mailing Address::

Newnan

State or Province of Mailing

Georgia

Address::

Country of Mailing Address::

Postal or Zip Code of Mailing

30306

Address::

RK/mg

PC Docs No. 603585